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APPLICANTS

Joseph S. Podolski, The Woodlands, TX;

Ronald Wiehle, Houston, TX;

** CONTINUING DATA *****

This application is a CIP of 10/427,768 04/30/2003
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 which claims benefit of 60/304,313 07/09/2001

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 02/23/2004

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 3	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

HOWREY SIMON ARNOLD & WHITE, LLP
 Box No. 34
 1299 Pennsylvania Avenue, N.W.
 Washington, DC
 20004-2402

TITLE

Methods and compositions with trans-clomiphene for treating wasting and lipodystrophy

FILING FEE RECEIVED 981	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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